SCHEDULE E)	PAGE 1 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee  Mosaic  Date	M M / D D / Y Y Y Y
Mailing Address 4801 Viewpoint Place  Amo	10 03 2012
City State Zip Code Cheverly MD 20781	180.00
Purpose of Expenditure Fliers  Category/ Type  004  Office Sou	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:  Sherrod Brown  Check One	e: President Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursem 2012	ent For: Primary General  Other (specify)
Full Name (Last, First, Middle Initial) of Payee  Mosaic  Date	10 03 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 4801 Viewpoint Place Amo	ount
City State Zip Code Cheverly MD 20781  Trans	1597.50 saction ID : D456189
Purpose of Expenditure Fliers  Category/ Type  Office Sou	ght: House State:  Senate District: 00  President
Name of Federal Candidate Supported or Opposed by Expenditure:  Barack Obama  Check One	
Calendar Year-To-Date Per Election for Office Sought 566760.54 Disbursem	ent For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1777.50
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7 7
(c) TOTAL Independent Expenditures	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (in party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler  [Electronically Filed] Date 10	05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

(SCHEDULE E)	PAGE 2 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report	filed on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	Date
Mosaic	Date
Mailing Address 4801 Viewpoint Place	10 03 / 2012
	Amount
City State Zip Code	900.00
Cheverly MD 20781	Transaction ID : D456190
Purpose of Expenditure Fliers Category/ Type 004	Office Sought: House State: PA Senate District: 12
Name of Federal Candidate Supported or Opposed by Expenditure:	President
MARK CRITZ (	Check One: Support Oppose
Calendar Year-10-Date Per Flection	Disbursement For: Primary General O12 Other (specify)
Full Name (Last, First, Middle Initial) of Payee  Mosaic	Date
	10 03 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 4801 Viewpoint Place	
	Amount
City State Zip Code Cheverly MD 20781	1305.00
Purpose of Expenditure Category/ Code	Transaction ID : D456191 Office Sought: House State: WI
Fliers Type 004	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
TOMMY G THOMPSON	Check One: Support Oppose
	Disbursement For: Primary General O12 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	2205.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	1171717
Under penalty of perjury I certify that the independent expenditures reported herein were no with, or at the request or suggestion of, any candidate or authorized committee or agent of e party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler	M = M / D = D / Y = Y = Y
[Electronically Filed] Date Signature	10 05 2012
-	

(SCHEDULE E)	PAGE 3 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report	filed on
Full Name (Last, First, Middle Initial) of Payee	
Mosaic	Date
	10 03 2012
Mailing Address 4801 Viewpoint Place	
O'the Other To Other	Amount
City State Zip Code Cheverly MD 20781	1305.00
	Transaction ID : D456192 Office Sought: House State: WI
Purpose of Expenditure Fliers Category/ Type 004	Sonato VI
	President District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One: Support Oppose
TAMMY BALDWIN	опеск опе.
Calendar Year-To-Date Per Election	Disbursement For: Primary General
for Office Sought	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Mosaic	M M / D D / Y Y Y Y
Mailing Address 4801 Viewpoint Place	03 2012
Walling Address 4801 Viewpoint Place	Amount
City State Zip Code	
Cheverly MD 20781	1597.50
Purpose of Expenditure Category/	Transaction ID : D456193  Office Sought: House State:
Fliers Category/ Type 004	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Willard Mitt Romney	Check One: Support Oppose
	Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought 566760.54	2012
Tot Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	2902.50
(b) SUBTOTAL of Unitemized Independent Expenditures	<ul> <li>  1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1</li></ul>
(c) TOTAL Independent Expenditures	<ul> <li>  1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1</li></ul>
Under penalty of perjury I certify that the independent expenditures reported herein were newith, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler	M = M / D = D / Y = Y = Y
[Electronically Filed] Date	10 05 2012
Signature	

(SCHEDULE E)	PAGE 4 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed	d on M=M / D=D / Y=Y=Y=Y
Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)	Date
Mailing Address 1325 Massachusetts Ave. NW	10 03 2012 Amount
City State Zip Code	
Washington DC 20005	37.78 Transaction ID : D456195
Purpose of Expenditure In Kind Staff  Category/ Type  Office Type	Ce Sought: House State: OH Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President
JOSH MANDEL Che	eck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disl	Oursement For: Primary General  Other (specify)
Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)	Date 10 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1325 Massachusetts Ave. NW	Amount
City State Zip Code	37.78
Washington DC 20005	Transaction ID : D456196
Purpose of Expenditure In Kind Staff Category/ Type 001	Ce Sought: House State: OH Senate District: 06
Name of Federal Candidate Supported or Opposed by Expenditure:	President
BILL JOHNSON Che	eck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disl	oursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	75.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date	10 05 2012
Signature	

(SCHEDULE E)	PAGE 5 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report to	filed on M M M / D D / Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)	Date
Mailing Address 1325 Massachusetts Ave. NW	10 03 2012  Amount
City State Zip Code	
Washington DC 20005	37.78
Purpose of Expenditure In Kind Staff  Category/ Type 001	Transaction ID : D456197  Office Sought: House State: OH Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Sherrod Brown	Check One: Support Oppose
	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)	Date 10 03 7 2012
Mailing Address 1325 Massachusetts Ave. NW	Amount
City State Zip Code	37.78
Washington DC 20005	Transaction ID : D456198
Purpose of Expenditure In Kind Staff  Category/ Type  Out  Out  Out  Out  Type	Office Sought: House State: OH Senate District: 06
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Charlie Wilson	Check One: Support Oppose
	Disbursement For: Primary General O12 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	75.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were nowith, or at the request or suggestion of, any candidate or authorized committee or agent of experty committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date	10 05 2012
Signature	

SCHEDULE E)	PAGE 6 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report	t filed on
Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)	Date
Mailing Address 1325 Massachusetts Ave. NW	10 03 2012 Amount
City State Zip Code	
Washington DC 20005	51.79 <b>Transaction ID : D456199</b>
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: FL Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:  CONNIE MACK	Check One: President Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)	Date 10 03 7 2012
Mailing Address 1325 Massachusetts Ave. NW	Amount
City State Zip Code Washington DC 20005	51.79
Purpose of Expenditure Category/	Transaction ID : D456200  Office Sought: House State: FL
In Kind Staff Type 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President  Check One: Support Oppose
BILL NELSON	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General  2012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	103.58
(b) SUBTOTAL of Unitemized Independent Expenditures	<b>•</b>
(c) TOTAL Independent Expenditures	<b>•</b>
Under penalty of perjury I certify that the independent expenditures reported herein were n with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date	10 05 2012
Signature	2012

SCHEDULE E)	PAGE 7 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
	C 00404287
Check If 24-hour report 48-hour report New report Amends report filed o	n M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)	Date
	10 03 / Y Y Y Y Y Y Y Y
Mailing Address 1325 Massachusetts Ave. NW	Amount
City State Zip Code	
Washington DC 20005	89.57
	ransaction ID : D456201 Sought: House State:
In Kind Staff 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President — 00
Willard Mitt Romney  Check	One: Support Oppose
<u> </u>	
Calendar Year-To-Date Per Election for Office Sought 566760.54	sement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)	Date
	10 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1325 Massachusetts Ave. NW	
	Amount
City State Zip Code	89.57
	ransaction ID : D456202
In Kind Stoff	Sought: House State:
Type 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	X President
Barack Obama Check	One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disburg 2012	sement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	179.14
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
	7 7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not mad with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler	W / D D / Y Y Y Y
[Electronically Filed] Date 10	05 2012
Signature	

SCHEDULE E)	PAGE 8 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report  48-hour report  New report  Amends report filed o	n M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
AFT Solidarity 527	Date
	10 03 2012
Mailing Address 555 New Jersey Ave. N.W.	Amount
City State Zip Code	100.00
Washington DC 20001	102.30 ransaction ID : D456203
	Sought: House State: WI
In Kind Staff Type 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
TOMMY G THOMPSON  Check	One: Support Oppose
Calendar Year-To-Date Per Election Disbur	sement For: Primary General
for Office Sought	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
AFT Solidarity 527	M M / D D / Y Y Y
Matter Address	10 03 2012
Mailing Address 555 New Jersey Ave. N.W.	Amazunt
	Amount
City State Zip Code Washington DC 20001	102.30
T	ransaction ID : D456204
In Kind Staff	Sought: House State: WI
Type 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
TAMMY BALDWIN Check	One: Support Oppose
Calendar Year-To-Date Per Election Disbur	sement For: Primary X General
for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	204.60
	, ,
(b) SUBTOTAL of Unitemized Independent Expenditures	
	7 7
(c) TOTAL Independent Expenditures	
	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not mad with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
M. Elizabeth II Chalen	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

SCHEDULE E)	PAGE 9 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
AFT Solidarity 527	Date
	10 03 / Y Y Y Y Y Y Y
Mailing Address 555 New Jersey Ave. N.W.	t
	Amount
City State Zip Code Washington DC 20001	135.18
	Transaction ID : D456205
In Kind Staff	e Sought: House State: FL
Type Utility Stall	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
CONNIE MACK Chec	ck One: Support X Oppose
Calendar Year-To-Date Per Election Disb	ursement For: Primary 🔀 General
for Office Sought 121453.24 2012	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
AFT Solidarity 527	M M / D D / Y Y Y Y
Mailing Address 555 New Jersey Ave. N.W.	10 03 2012
Maining Addices 555 New Jersey Ave. N. W.	Amount
City State Zip Code	
Washington DC 20001	135.18
0,500	Transaction ID : D456206 e Sought: House State: FL
In Kind Staff  Category/ Type  001	Senate Surviv
	President District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	ck One: Support Oppose
BILL NELSON CITE	The circumstance of the control of the circumstance of the circums
Calendar Year-To-Date Per Election Disb	ursement For: Primary X General
for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	270.36
	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	
	7 7 7
(c) TOTAL Independent Expenditures	
	7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler	
[Electronically Filed] Date 1	0 05 2012
Signature	

(SCHEDULE E)	PAGE 10 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report	filed on
Full Name (Last, First, Middle Initial) of Payee	
Plasterers' Cement Masons' & Shop Hands Political Action Committee	Date  10 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 11720 Beltsville Drive #700	Amount
City State Zip Code	
Beltsville MD 20705	194.36 Transaction ID : D456207
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: PA Senate District: 12
Name of Federal Candidate Supported or Opposed by Expenditure:	President
KEITH ROTHFUS	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General O12 Other (specify)
Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee  Mailing Address 11720 Beltsville Drive #700	Date  10  Amount
City State Zip Code	
Beltsville MD 20705	194.36 Transaction ID : D456208
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: PA Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
TOM SMITH	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 43176.14	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	388.72
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	·
Under penalty of perjury I certify that the independent expenditures reported herein were now with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date	10 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature Date	10 05 2012

SCHEDULE E)	PAGE 11 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed on	T = M / D = D / Y = Y = Y
	10 03 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 11720 Beltsville Drive #700  Amou	int
City State Zip Code Beltsville MD 20705	194.36 uction ID : D456209
Purpose of Expenditure In Kind Staff  Category/ Type  Office Soug	ht: House State: PA Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:  Bob Casey  Check One:	President  Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disburseme 2012 O	nt For: Primary General ther (specify)
Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee  Mailing Address 11720 Beltsville Drive #700	10 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Amou	int
City State Zip Code Beltsville MD 20705  Transa	194.36 action ID : D456210
Purpose of Expenditure In Kind Staff  Category/ Type  Office Soug	House State: PA Senate District: 12 President
Name of Federal Candidate Supported or Opposed by Expenditure:  MARK CRITZ  Check One:	
Calendar Year-To-Date Per Election for Office Sought Disburseme 2012 O	nt For: Primary General ther (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	388.72
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler  [Electronically Filed] Date    Manual	05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

(SCHEDULE E)	PAGE 12 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report	M
Full Name (Last, First, Middle Initial) of Payee AFT Solidarity 527	
Mailing Address 555 New Jersey Ave. N.W.	10 03 2012
Amou	nt
City State Zip Code	219.19
	ction ID : D456211
Purpose of Expenditure In Kind Staff Category/ Type Office Soug	ht: House State: OH Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President
JOSH MANDEL Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disburseme 2012	nt For: Primary General ther (specify)
Full Name (Last, First, Middle Initial) of Payee Date	
	10 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 555 New Jersey Ave. N.W.	L
City State Zip Code	
Washington DC 20001	219.19
Purpose of Expenditure Category/ Office Soug	ht: House State: OH
In Kind Staff 001 Type 001	Senate District: 06
Name of Federal Candidate Supported or Opposed by Expenditure:  Check One:	President
BILL JOHNSON Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disburseme 2012 O	nt For: Primary General ther (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	438.38
(a) SUBTOTAL of Itemized Independent Expenditures	438.38
	438.38
(b) SUBTOTAL of Unitemized Independent Expenditures	438.38
(b) SUBTOTAL of Unitemized Independent Expenditures	cooperation, consultation, or concert
(b) SUBTOTAL of Unitemized Independent Expenditures	cooperation, consultation, or concert

SCHEDULE E)		PAGE 13 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	I	FEC IDENTIFICATION NUMBER ▼
Workers' Voice		C C00484287
Check If 24-hour report X 48-hour report New report	Amends report filed on	M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee AFT Solidarity 527	Date	M / D D / Y Y Y
Mailing Address 555 New Jersey Ave. N.W.		03 2012
City State 2	Zip Code	
	20001	219.19 tion ID : D456213
Purpose of Expenditure In Kind Staff	egory/ Office Sought Type 001	t: House State: OH Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:		President
Sherrod Brown	Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought	147894.81 Disbursement 2012 Oth	t For: Primary General  Per (specify)
Full Name (Last, First, Middle Initial) of Payee AFT Solidarity 527		M / D D / Y Y Y
Mailing Address 555 New Jersey Ave. N.W.		03 2012
	Amoun	1
	Zip Code 20001	219.19 ation ID : D456214
Purpose of Expenditure In Kind Staff	egory/ Office Sought Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure:		President
Charlie Wilson	Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought	26446.57 Disbursement 2012 Oth	t For: Primary General  ner (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		438.38
(b) SUBTOTAL of Unitemized Independent Expenditures	······································	
(c) TOTAL Independent Expenditures	· · · · · · · · · · · · · · · · · · ·	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler [Electronic	ally Filed] Date 10	05 2012
Signature	Date 10	2012

SCHEDULE E)	PAGE 14 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee	M   M
Mailing Address 11720 Beltsville Drive #700 Amo	10 03 2012 ount
City State Zip Code	
Beltsville MD 20705	301.86
Purpose of Expenditure In Kind Staff  Category/ Type  Office Source Office Source Type	ght: House State: FL Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
CONNIE MACK  Check One	e: Support X Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursem 2012	ent For: Primary General  Other (specify)
Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee  Mailing Address 11720 Beltsville Drive #700	10 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Amo	ount
City State Zip Code Beltsville MD 20705	301.86
Purpose of Expenditure In Kind Staff  Category/ Type  Office Sou	ght: House State: FL Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
BILL NELSON Check One	e: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursem 2012	ent For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	603.72
(b) SUBTOTAL of Unitemized Independent Expenditures	171171171
(c) TOTAL Independent Expenditures	17.17.1.
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (i party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

SCHEDULE E)	PAGE 15 OF 35 FOR SE OF FORM 24/48
	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed on	M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee	M / D D / Y Y Y Y
	10 03 2012
City State Zip Code	
Beltsville MD 20705	321.82 etion ID : D456217
Purpose of Expenditure In Kind Staff  Category/ Type  Office Sough	t: House State: WI Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:  TOMMY G THOMPSON  Check One:	President Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursement 2012 Oth	t For: Primary General ner (specify)
	10 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code Beltsville MD 20705	321.82 ction ID : D456218
Purpose of Expenditure In Kind Staff Category/ Type 001 Office Sough	t: House State: WI Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:  TAMMY BALDWIN  Check One:	President  Support  Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursement 2012 Oth	t For: Primary General
(a) SUBTOTAL of Itemized Independent Expenditures	643.64
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cowith, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler  [Electronically Filed] Date 10	05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

SCHEDULE E)	PAGE 16 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report  48-hour report  New report  Amends report filed of	on M = M / D = D / Y = Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
AFT Solidarity 527	Date
	10 03 2012
Mailing Address 555 New Jersey Ave. N.W.	Amount
City State Zip Code	450.07
Washington DC 20001	456.67 Transaction ID : D456219
	Sought: House State:
In Kind Staff Type 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President — 00
Willard Mitt Romney  Check	c One: Support ズ Oppose
,	
Calendar Year-To-Date Per Election Disbur	rsement For: Primary General
for Office Sought	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
AFT Solidarity 527	M M / D D / Y Y Y Y
Matter a Address	10 03 2012
Mailing Address 555 New Jersey Ave. N.W.	Amount
	Amount
City State Zip Code Washington DC 20001	456.67
	Transaction ID : D456220
In Kind Staff	Sought: House State:
Type 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President —
Barack Obama Check	COne: Support Oppose
Calendar Year-To-Date Per Election Disbut	rsement For: Primary X General
for Office Sought 566760.54 2012	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	913.34
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
	7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made	No in cooperation, consultation, or concert
with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler	
[Electronically Filed] Date 10	05 2012
Signature	

In Kind Staff Type 001	
Workers' Voice  C C00484287  Check If 24-hour report	
Check If 24-hour report	
COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION  Mailing Address 100 Indiana Avenue, N.W.  City State Zip Code Washington DC 20001  Purpose of Expenditure In Kind Staff  Category/ Type 001  Category/ Type 001  Category/ Type 001  Date  M 10	Y
Mailing Address 100 Indiana Avenue, N.W.  City State Zip Code Washington DC 20001  Purpose of Expenditure In Kind Staff  Category/ Type 001  Category/ Type 001  Provident  Amount  Transaction ID: D456221  House State: Provident  Provident	Y
Washington DC 20001 Transaction ID : D456221  Purpose of Expenditure In Kind Staff Category/ Type 001 Office Sought: Senate District: 1	ᅴ
Purpose of Expenditure In Kind Staff  Category/ Type  Office Sought: House State: Proceedings of the control of	
Name of Federal Candidate Supported or Opposed by Expenditure:	A2
KEITH ROTHFUS Check One: Support Oppos	9
Calendar Year-To-Date Per Election for Office Sought Disbursement For: Primary Seneral 2012 Other (specify)	ıl
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION  Mailing Address, 1994, if a 1,000 per payer  Mailing Addr	Y
Mailing Address 100 Indiana Avenue, N.W.  Amount	
City         State         Zip Code         541.66           Washington         DC         20001         Transaction ID : D456222	
Procident	A 10
Name of Federal Candidate Supported or Opposed by Expenditure:  TOM SMITH  Check One:  Check One:  Check One:  Check Opposed by Expenditure:  Check One:  Check On	Э
Calendar Year-To-Date Per Election for Office Sought	ıl 
(a) SUBTOTAL of Itemized Independent Expenditures	
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or conc with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a politic party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler  [Electronically Filed] Date 10 05 2012	

SCHEDULE E)	PAGE 18 OF 35 FOR SE OF FORM 24/48
	EC IDENTIFICATION NUMBER ▼
Workers' Voice	C00484287
Check If 24-hour report  48-hour report  New report  Amends report filed on	M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION  Mailing Address	
Mailing Address 100 Indiana Avenue, N.W.  Amount	
City State Zip Code Washington DC 20001	541.66 on ID : D456223
Purpose of Expenditure In Kind Staff Category/ Type 001 Office Sought:	House State: PA Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:  Bob Casey  Check One:	President Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursement F 2012 Other	For: Primary General
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION  Date  10	
Mailing Address 100 Indiana Avenue, N.W.  Amount	
City State Zip Code Washington DC 20001  Transacti	541.66 on ID : D456224
Purpose of Expenditure In Kind Staff  Category/ Type  Office Sought:	House State: PA Senate District: 12 President
Name of Federal Candidate Supported or Opposed by Expenditure:  MARK CRITZ  Check One:	X Support Oppose
Calendar Year-To-Date Per Election for Office Sought 57756.80 Disbursement F	For: Primary General r (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1083.32
(b) SUBTOTAL of Unitemized Independent Expenditures	7 1 7 1 7 1
(c) TOTAL Independent Expenditures	7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in coo with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
[Electronically Filed] Date 10	05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

(SCHEDULE E)	PAGE 19 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice C c00484287	
Check If 24-hour report X 48-hour report New report Amends report	ort filed on
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION	Date
Mailing Address 100 Indiana Avenue, N.W.	10 03 2012  Amount
City State Zip Code Washington DC 20001	815.70
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: WI Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: TOMMY G THOMPSON	Check One: President Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General  2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATIO	Date 10 03 / 2012
Mailing Address 100 Indiana Avenue, N.W.	Amount
City State Zip Code Washington DC 20001	815.70 Transaction ID : D456226
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: WI Senate District: 00 President
Name of Federal Candidate Supported or Opposed by Expenditure:  TAMMY BALDWIN	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	. ▶ 1631.40
(b) SUBTOTAL of Unitemized Independent Expenditures	•
(c) TOTAL Independent Expenditures	•
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler  [Electronically Filed] Date	10 05 / 2012

(SCHEDULE E)	PAGE 20 OF 35 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice C c00484287		
Check If 24-hour report X 48-hour report New report Amends report	t filed on	
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION	Date	
Mailing Address 100 Indiana Avenue, N.W.	M 10	
	Amount	
City State Zip Code Washington DC 20001	1083.32 Transaction ID : D456227	
Purpose of Expenditure In Kind Staff  Category/ Type  001	Office Sought: House State: FL Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:  CONNIE MACK	President  Check One: Support Depose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General  2012 Other (specify)	
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION Mailing Address 100 Indiana Avenue, N.W.	N Date 10 03 / 2012	
	Amount	
City State Zip Code Washington DC 20001	1083.32 Transaction ID : D456228	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: FL Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON	President  Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	2166.64	
(b) SUBTOTAL of Unitemized Independent Expenditures	<b>&gt;</b>	
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were r with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler [Electronically Filed] Date	10 05 2012	
Signature		

SCHEDULE E)	PAGE 21 OF 35 FOR SE OF FORM 24/48
	EC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed on	M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee	M / D D / Y Y Y Y
Mailing Address 11720 Beltsville Drive #700  Amount	0 03 2012
City State Zip Code	
Beltsville MD 20705	1376.75 tion ID : D456229
Purpose of Expenditure In Kind Staff  Category/ Type 001  Office Sought:	
Name of Federal Candidate Supported or Opposed by Expenditure:  Willard Mitt Romney  Check One:	President  Support  Oppose
Calendar Year-To-Date Per Election  Disbursement	For: Primary General
other office Sought	er (specify)
	0 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 11720 Beltsville Drive #700  Amount	
City State Zip Code	1376.75
Beltsville MD 20705	tion ID : D456230
Purpose of Expenditure Category/ Type O01	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:  Barack Obama  Check One:	President Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursement 2012 Other	er (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	2753.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	7 . 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in co with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

SCHEDULE E)	PAGE 22 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report  48-hour report  New report  Amends report filed on	M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
AFSCME Special Account	10 03 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1625 L Street, NW Amour	
City State Zip Code	
Washington DC 20036	1383.94 ction ID : D456231
Purpose of Expenditure In Kind Staff Category/ Type O01 Office Sough	•
Name of Federal Candidate Supported or Opposed by Expenditure:	President ——
KEITH ROTHFUS  Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought 57756.80 Disbursement 2012 Otto	nt For: Primary General her (specify)
	M / D D / Y Y Y Y
Mailing Address 1625 L Street, NW	10 03 2012
Amour	nt
City State Zip Code	1383.94
Washington DC 20036 Transa	ction ID : D456232
Purpose of Expenditure In Kind Staff Category/ Type O01 Office Sough	nt: House State: PA Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
TOM SMITH Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought 5 43176.14 Disbursemer 2012 Ot	nt For: Primary General her (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	2767.88
(b) SUBTOTAL of Unitemized Independent Expenditures	
	7
(c) TOTAL Independent Expenditures	7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in c with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	05 2012
Signature	

SCHEDULE E)	PAGE 23 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee  AFSCME Special Account	M M / D D / Y Y Y Y
Mailing Address 1625 L Street, NW	10 03 2012
City State Zip Code Washington DC 20036	1383.94
Purpose of Expenditure In Kind Staff  Category/ Type  Office Sou	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:  Bob Casey  Check One	President  Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbursem 2012	ent For: Primary General
Full Name (Last, First, Middle Initial) of Payee  AFSCME Special Account	10 03 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1625 L Street, NW Amo	ount
	1383.94 saction ID : D456234
Purpose of Expenditure In Kind Staff  Category/ Type  Office Sou	Senate District: PA President
Name of Federal Candidate Supported or Opposed by Expenditure:  MARK CRITZ  Check One	
Calendar Year-To-Date Per Election for Office Sought 57756.80 Disbursem	ent For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	2767.88
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (in party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler  [Electronically Filed] Date 10	05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

SCHEDULE E)	PAGE 24 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account	te
Mailing Address 1625 L Street, NW	10 03 2012
City State Zip Code	
Washington DC 20036	2667.49 saction ID : D456235
Purpose of Expenditure In Kind Staff  Category/ Type  Office So	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:  JOSH MANDEL  Check Or	President  ne: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 53521.85 Disburser 2012	ment For: Primary General  Other (specify)
Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account	te 10 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1625 L Street, NW	nount
City State Zip Code	
Washington DC 20036	2667.49
Purpose of Expenditure   Category/ Type   O01   Office So	Sonoto —
Name of Federal Candidate Supported or Opposed by Expenditure:	President District: 06
BILL JOHNSON Check O	ne: Support X Oppose
Calendar Year-To-Date Per Election for Office Sought Disburser 26446.57	ment For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	5334.98
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made i with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	/ DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	التتا لتا

SCHEDULE E)	PAGE 25 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
AFSCME Special Account	Date    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
Mailing Address 1625 L Street, NW	Amount
City State Zip Code	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Washington DC 20036	2667.49  Transaction ID : D456237
	Sought: House State: OH Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
	k One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 147894.81 Disbute 2012	ursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account	Date
Mailing Address 1625 L Street, NW	10 03 2012
	Amount
City State Zip Code	2667.49
Washington DC 20036	Transaction ID : D456238
Purpose of Expenditure In Kind Staff Category/ Type 001	Sought: House State: OH Senate District: 06
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Charlie Wilson Chec	k One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbu 26446.57	orsement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	5334.98
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	05 2012
Signature	

(SCHEDULE E)	PAGE 26 OF 35 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends repo	rt filed on	
Full Name (Last, First, Middle Initial) of Payee	5.	
COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION	Date    M   M   M   D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y	
Mailing Address 100 Indiana Avenue, N.W.	Amount	
City State Zip Code		
Washington DC 20001	2700.23	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President — 00	
Willard Mitt Romney	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General  2012 Other (specify)	
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATIO	N Date 10 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 100 Indiana Avenue, N.W.	Amount	
City State Zip Code	2700.23	
Washington DC 20001	Transaction ID : D456240	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———	
Barack Obama	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	5400.46	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler [Electronically Filed] Date	10 05 2012	
Signature		

SCHEDULE E)	PAGE 27 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account	M M / D D / Y Y Y
Mailing Address 1625 L Street, NW Amou	10 03 2012 unt
City State Zip Code Washington DC 20036	3819.97
Purpose of Expenditure In Kind Staff  Category/ Type  Office Source Offi	ght: House State: FL Senate District: 00 President
Name of Federal Candidate Supported or Opposed by Expenditure:  CONNIE MACK  Check One	
Calendar Year-To-Date Per Election for Office Sought Disburseme 2012	ent For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1625 L Street, NW Amo	unt
City State Zip Code Washington DC 20036  Trans	3819.97 action ID : D456242
Purpose of Expenditure In Kind Staff  Category/ Type  Office South	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:  BILL NELSON  Check One	President  Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disburseme 2012	ent For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	7639.94
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (i party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler  [Electronically Filed] Date  Signature	05 / 2012
-	

SCHEDULE E)	PAGE 28 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed of	on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	_
AFSCME Special Account	Date    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
Mailing Address 1625 L Street, NW	Amount
City State Zip Code	
Washington DC 20036	7871.40
Purpose of Expenditure Category/ Office	Sought: House State:
Type 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:  Willard Mitt Romney  Check	X President  k One: Support X Oppose
williard with Northicy	
Calendar Year-To-Date Per Election for Office Sought 566760.54 Disbut	other (specify)
Full Name (Last, First, Middle Initial) of Payee  AFSCME Special Account	Date
Mailing Address 1625 L Street, NW	10 03 2012
maining yearses 1625 L Street, NVV	Amount
City State Zip Code	7871.40
Washington DC 20036	Transaction ID : D456244
Purpose of Expenditure In Kind Staff Category/ Type O01	Sought: House State: Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President —
Barack Obama Check	k One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbu 2012	orsement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	15742.80
(b) SUBTOTAL of Unitemized Independent Expenditures	
(b) COBTOTAL OF CHIROMEZON MOOPENING Experioration	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

SCHEDULE E)	PAGE 29 OF 35 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y	
Full Name (Last, First, Middle Initial) of Payee NGP VAN, INC.	M M / D D / Y Y Y Y	
Mailing Address 1225 Eye Street, NW	10 03 2012	
Suite 1225	unt	
City State Zip Code	7500.00	
Washington DC 20005	7300.00 action ID : D456518	
Purpose of Expenditure Predictive Dialer Calls  Category/ Type  Office Sough		
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———	
Barack Obama Check One	: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought Disburseme 2012	ent For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee Extras, Inc.	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 151 East Lost Toritos		
Amor	unt	
City State Zip Code Weslaco TX 78596  Trans	478.37 action ID : D456751	
Purpose of Expenditure Canvassers  Category/ Type  Office Source Office Source	ght: House State: NV Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———	
DEAN HELLER Check One	Support Oppose	
Calendar Year-To-Date Per Election for Office Sought Disburseme 2012	ent For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	7978.37	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler  [Electronically Filed] Date    To be a signature   To be a sig	05 / 2012	
0.9		

SCHEDULE E)	PAGE 30 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
Extras, Inc.	Date Man / Dad / Y Y Y Y Y
Mailing Address 151 East Lost Toritos	10 03 2012
City State Zip Code	
Weslaco TX 78596	478.37 ansaction ID : D456752
Purpose of Expenditure Category/ Office S	Sought: House State:
Type 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:  Willard Mitt Romney  Check	President  One: Support X Oppose
Calendar Year-To-Date Per Election Disburs	ement For: Primary General
for Office Sought 566760.54 2012	Other (specify)
Full Name (Last, First, Middle Initial) of Payee  Extras, Inc.	Pate
Mailing Address 151 East Lost Toritos	10 03 / 2012
	mount
City State Zip Code	478.37
Weslaco TX 78596	ansaction ID : D456754
Purpose of Expenditure Category/ Office S	
Type 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:  Barack Obama  Check	
	ement For: Primary General
for Office Sought 566760.54 2012	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	956.74
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
	- Agr
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler  [Electronically Filed] Date 10	/ D D / Y Y Y Y Y
Signature [Electronically Filea] Date 10	05 2012

(SCHEDULE E)	PAGE 31 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report	filed on
Full Name (Last, First, Middle Initial) of Payee	
AFL-CIO	Date
Mailing Address 815 - 16th Street, NW	10 03 2012
011	Amount
City State Zip Code Washington DC 20006	318.90
Divines of Funeralities	Transaction ID : D456253 Office Sought: House State:
Purpose of Expenditure Walk Packets  Category/ Type  004	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	X President
Barack Obama	Check One: Support Oppose
Calendal real-10-date reliciedium	Disbursement For: Primary General O12 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
AFL-CIO	M M / D D / Y Y Y Y
Mailing Address 815 - 16th Street, NW	10 03 2012
	Amount
City State Zip Code	95.56
Washington DC 20006	Transaction ID : D456256
Purpose of Expenditure Walk Packets  Category/ Type 004	Office Sought: House State: NV Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
DEAN HELLER	Check One: Support Oppose
	Disbursement For: Primary General 012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	414.46
(b) SUBTOTAL of Unitemized Independent Expenditures	-
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were no with, or at the request or suggestion of, any candidate or authorized committee or agent of e party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler	M = M / D = D / Y = Y = Y
[Electronically Filed] Date Signature	10 05 2012
5.gs.w. o	

SCHEDULE E)	PAGE 32 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name (Last, First, Middle Initial) of Payee	Dete
AFL-CIO	Date
Ma Tana Addison	10 03 2012
Mailing Address 815 - 16th Street, NW	Amount
City State Zip Code	113.53
Washington DC 20006	Transaction ID : D456258
Purpose of Expenditure Category/ Office	e Sought: House State: OH
Walk Packets 004	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
JOSH MANDEL Chec	k One: Support X Oppose
	ursement For: Primary 🔀 General
for Office Sought 53521.85	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
AFL-CIO	M M / D D / Y Y Y
Mailing Address 815 - 16th Street, NW	10 03 2012
The state of the s	Amount
City State Zip Code	
Washington DC 20006	113.53
Office	Transaction ID : D456259  Sought: House State: OH
Walk Packets Category/ Type 004	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President — 00
	sk One: Support Oppose
Diele	
147894 81 2012	ursement For: Primary General
for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	227.06
(b) SUBTOTAL of Unitemized Independent Expenditures	
	411411
(c) TOTAL Independent Expenditures	
	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler	M / D D / Y Y Y Y
[Electronically Filed] Date	
Signature	

SCHEDULE E)	PAGE 33 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
AFL-CIO	M = M   / D = D   / Y = Y = Y = Y
Mailing Address 815 - 16th Street, NW	10 03 2012 ount
	ount
City State Zip Code Washington DC 20006	164.36 saction ID : D456260
Purpose of Expenditure Walk Packets  Category/ Type  004  Office Sou	•
Name of Federal Candidate Supported or Opposed by Expenditure:	President
TOM SMITH Check On	ne: Support X Oppose
Calendar Year-To-Date Per Election for Office Sought  Disbursem 2012	nent For: Primary General  Other (specify)
Full Name (Last, First, Middle Initial) of Payee AFL-CIO	e
Mailing Address 815 - 16th Street, NW	10 03 2012
	ount
City State Zip Code	164.36
Washington DC 20006	saction ID : D456261
Purpose of Expenditure Walk Packets  Category/ Type  Office Sou	
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Bob Casey Check On	ne: X Support Oppose
Calendar Year-To-Date Per Election for Office Sought J 43176.14 Disbursem	nent For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	328.72
(h) CURTOTAL of Uniterpized Independent Europeditures	
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	/ 05 2012
Signature	

SCHEDULE E)	PAGE 34 OF 35 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed of	on M = M / D = D / Y = Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
AFL-CIÒ	Date
Mailing Address 815 - 16th Street, NW	10 03 2012 Amount
City State Zip Code	Athount
Washington DC 20006	318.90 ransaction ID : D456264
	Sought: House State:
	Senate District: 00 President
Name of Federal Candidate Supported or Opposed by Expenditure:  Willard Mitt Romney  Check	
Calendar Year-To-Date Per Election for Office Sought  Disbur 2012	rsement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee AFL-CIO	Date
Mailing Address 815 - 16th Street, NW	10 03 2012
	Amount
City State Zip Code Washington DC 20006	18.26
Description of Ferroral Physics	ransaction ID : D456266 Sought: House State: WI
Walk Packets  Category/ Type  Out  Out  Out  Out  Out  Out  Out  Ou	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President — Onnes
TAMMY BALDWIN Check	One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 109773.64 Disbur 2012	Sement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	337.16
(a) SOBTOTAL OF ROTHERON MICEPORTURE EXPONENTIAL CO.	307.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

SCHEDULE E)	PAGE 35 OF 35 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y	
Full Name (Last, First, Middle Initial) of Payee AFL-CIO	M M / D D / Y Y Y Y	
Mailing Address 815 - 16th Street, NW	10 03 2012	
City State Zip Code Washington DC 20006	18.26 action ID : D456267	
Purpose of Expenditure Walk Packets  Category/ Type  Office Soug	_	
Name of Federal Candidate Supported or Opposed by Expenditure:  TOMMY G THOMPSON  Check One	President  Support Oppose	
Calendar Year-To-Date Per Election for Office Sought Disburseme 2012	ent For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee Date	M M / D D / Y Y Y Y	
Mailing Address Amou	unt	
City State Zip Code	171171171	
Purpose of Expenditure  Category/ Type  Office Soug	Senate District:	
Name of Federal Candidate Supported or Opposed by Expenditure:  Check One	President  Support Oppose	
Calendar Year-To-Date Per Election for Office Sought Disburseme	ent For: Primary General  Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	18.26	
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7	
(c) TOTAL Independent Expenditures	75576.57	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler  [Electronically Filed] Date  Manual Control of the contro	05 / 2012	